									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2000									0002.0012					
CLAIMS AS FILED - PART I								09936913						
		CLAIMS A	(Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS			Ø0					RATI	E	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			Ø 0 minus 20=		• છ			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		×		·	X40=			OR	X80=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	IESENT					+135=			OR	+270=		
• H	the difference	less than ze	ss than zero, enter "0" in column 2			1	TOTAL '		OR	TOTAL	Ji			
CLAIMS AS AMENDED - PART II												OTHER	THAN	
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMAL	L E	NTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 20	Minus	- 1	0	- /		X\$ 9:			OR	X\$18=		
	Independent	• 3	Minus	***	3	= /		X40=		7	OR	X80≈	7	
	FIRST PRESE	NTATION OF MU	JLIPLE DEP	ENDEN	GLAIM		'	+135=	_	7	OR	+270=	1	
								101/			OR	TOTAL		
11 16 05 (Column 1) (Column 2) (Column 3)								ADDIT. FI	EE (ADOIT. FEE		
		CLAIMS		HIGH	EST		1 [1	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA]	RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	· 30	Minus	<u>. 9</u>	<u> </u>	= /		X\$ 9=	•		OR	X\$18=		
	Independent	NTATION OF ML	Minus	ENDENT	CLAIM			X40=			OR	X80≖		
	· · · · · · · · · · · · · · · · · · ·			<u> </u>	00		'	+135=	.		OR	+270=		
								TOTA			OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)												ADDA. FEEL		
AMENDMENT C		CLAIMS HIGH		HIGH	EST				Т	ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO		EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	••		a .	lΓ	X\$ 9=			OR	X\$18=		
	independent	•	Minus	***		-	lt	X40=	1		25	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+		OR	7,000		
											OR	+270=		
•••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Nurr	ber Previously Pal	a For (Total or	independe	ent) is the	nighest numbe	it ton	nd in the	app	ropnate box	in col	LUTTAT T.		